

PPO Medical Benefits Comparison

Anthem PPO Plans vs Cigna Classic PPO

| Benefit Outline | OrthoCarolina Classic PPO | *In-Network | |
|--|------------------------------|--------------------------|-----------------------------|
| | | PT Solutions Plus PPO | PT Solutions Premium PPO |
| Carrier | Cigna | Anthem BCBS | Anthem BCBS |
| Deductible (Individual / Family) | \$2,500 / \$5,000 | \$1,500 / \$4,500 | \$1,000 / \$3,000 |
| Annual Employer HSA Contribution (HDHP only) | | | |
| Out-of-Pocket Maximum (Ind/Fam) | \$6,550 / \$13,100 | \$7,150 / \$14,300 | \$7,150 / \$14,300 |
| Coinsurance (Carrier %) | 70% | 90% | 100% |
| Wellness / Preventive Care | 0% | 0% | 0% |
| Primary Care Office Visit | \$30 copay | \$35 copay | \$25 copay |
| Specialist Office Visit | \$60 copay | \$50 copay | \$50 copay |
| Urgent Care Visit | \$60 copay | \$50 copay | \$50 copay |
| Emergency Room | \$300 copay | \$500 copay | \$500 copay |
| Outpatient Surgical Facility | 30% (ad) | 10% (ad) | 0% (ad) |
| Inpatient Hospital Facility | 30% (ad) | 10% (ad) | 0% (ad) |
| Pharmacy Retail (30 day supply) | | | |
| Generic (Tier 1) | \$10 copay | \$15 copay | \$15 copay |
| Preferred (Tier 2) | \$35 copay | \$35 copay | \$45 copay |
| Non-Preferred (Tier 3) | \$55 copay | \$60 copay | \$85 copay |
| Specialty (Tier 4) | \$100 copay | 20% (max \$300) | 20% (max \$250) |
| Pharmacy Mail Order (90 day supply) | | | |
| Generic (Tier 1) | \$20 copay | \$15 copay | \$38 copay |
| Preferred (Tier 2) | \$88 copay | \$70 copay | \$113 copay |
| Non-Preferred (Tier 3) | \$138 copay | \$180 copay | \$213 copay |
| Specialty (Tier 4) | \$250 copay | 20% (max \$300) | 20% (max \$250) |
| * (ad) = After Deductible | | | |

PPO Medical Premium Cost Comparison

Cigna Classic PPO vs Anthem PPO Plans

➤ 24 pay deductions vs 26

| Bi-Weekly (26 pay periods) | | | Semi-Monthly (24 Pay Periods) | |
|--|-------------------|---------------|-------------------------------|--------------------|
| Employee Earning < \$50,000 BI-Weekly payroll deductions | | | All Earning Levels | All Earning Levels |
| Cigna PPO | Non-Wellness Rate | Wellness Rate | Plus PPO | Premium PPO |
| Employee only | \$82.63 | \$63.40 | \$105.30 | \$167.68 |
| Employee + spouse | \$216.48 | \$197.25 | \$406.72 | \$455.80 |
| Employee + child | \$164.16 | \$144.93 | \$165.43 | \$301.83 |
| Employee + children | \$201.96 | \$182.87 | \$165.43 | \$301.83 |
| Employee + family | \$341.87 | \$322.64 | \$421.48 | \$486.30 |
| Employee Earning > \$50,000 BI-Weekly payroll deductions | | | | |
| Cigna PPO | Non-Wellness Rate | Wellness Rate | | |
| Employee only | \$97.21 | \$77.98 | \$105.30 | \$167.68 |
| Employee + spouse | \$254.68 | \$235.45 | \$406.72 | \$455.80 |
| Employee + child | \$193.13 | \$173.90 | \$165.43 | \$301.83 |
| Employee + children | \$237.60 | \$218.37 | \$165.43 | \$301.83 |
| Employee + family | \$402.19 | \$382.96 | \$421.48 | \$486.30 |

HDHP Medical Benefits Comparison

Anthem Value HDHP w HSA vs Cigna Silver HDHP w HSA

| Benefit Outline | *In-Network | |
|--|------------------------------------|----------------------------------|
| | OrthoCarolina Silver HDHP w HSA | PT Solutions Value HDHP w HSA |
| Carrier | Cigna | Anthem BCBS |
| Deductible (Individual / Family) | \$3,200 / \$6,000 | \$3,000 / \$6,000 |
| Annual Employer HSA Contribution (HDHP only) | Up to \$1,000 (Wellness Plan) | \$500 / \$1000 |
| Out-of-Pocket Maximum (Ind/Fam) | \$5,000 / \$10,000 | \$7,000 / \$14,000 |
| Coinsurance (Carrier %) | 90% | 80% |
| Wellness / Preventive Care | 0% | 0% |
| Primary Care Office Visit | \$30 copay (ad) | 20% (ad) |
| Specialist Office Visit | \$30 copay (ad) | 20% (ad) |
| Urgent Care Visit | \$60 copay (ad) | 20% (ad) |
| Emergency Room | \$150 copay (ad) | 20% (ad) |
| Outpatient Surgical Facility | 10% (ad) | 20% (ad) |
| Inpatient Hospital Facility | 10% (ad) | 20% (ad) |
| Pharmacy Retail (30 day supply) | | |
| Generic (Tier 1) | \$10 copay (ad) | 20% (ad) |
| Preferred (Tier 2) | \$35 copay (ad) | 20% (ad) |
| Non-Preferred (Tier 3) | \$55 copay (ad) | 20% (ad) |
| Specialty (Tier 4) | \$100 copay (ad) | 20% (ad) |
| Pharmacy Mail Order (90 day supply) | | |
| Generic (Tier 1) | \$20 copay (ad) | 20% (ad) |
| Preferred (Tier 2) | \$88 copay (ad) | 20% (ad) |
| Non-Preferred (Tier 3) | \$138 copay (ad) | 20% (ad) |
| Specialty (Tier 4) | \$250 copay (ad) | 20% (ad) |
| * (ad) = After Deductible | | |

HDHP Medical Premium Cost Comparison

CIGNA Silver HDHP vs Anthem Value HDHP

➤ 26 pay deductions vs 24

| Bi-Weekly (26 pay periods) | | | Semi-Monthly (24 Pay Periods) |
|--|--------------------------|----------------------|-------------------------------|
| Employee Earning < \$50,000 BI-Weekly payroll deductions | | | All Earning Levels |
| Cigna Silver HDHP | Non-Wellness Rate | Wellness Rate | Value HDHP w HSA |
| Employee only | \$63.84 | \$44.61 | \$25.00 + \$500 HSA |
| Employee + spouse | \$200.88 | \$181.65 | \$210.74 + \$1,000 HSA |
| Employee + child | \$136.38 | \$117.15 | \$119.18 + \$1,000 HSA |
| Employee + children | \$174.00 | \$154.77 | \$119.18 + \$1,000 HSA |
| Employee + family | \$313.53 | \$294.30 | \$213.98 + \$1,000 HSA |
| Employee Earning > \$50,000 BI-Weekly payroll deductions | | | |
| Cigna Silver HDHP | Non-Wellness Rate | Wellness Rate | |
| Employee only | \$75.11 | \$55.88 | \$25.00 + \$500 HSA |
| Employee + spouse | \$236.33 | \$217.10 | \$210.74 + \$1,000 HSA |
| Employee + child | \$160.45 | \$141.22 | \$119.18 + \$1,000 HSA |
| Employee + children | \$204.71 | \$185.48 | \$119.18 + \$1,000 HSA |
| Employee + family | \$368.86 | \$349.63 | \$213.98 + \$1,000 HSA |

Dental Benefits Comparison

Delta Dental vs Metlife Core and Buy-up

- 26 pay deductions vs 24
- Both provide in and out of network coverage with in-network discount

| Benefit Outline | OrthoCarolina | PT Solutions | |
|---------------------------------------|---------------------------------------|--------------------------------------|------------------------------|
| | | Core | Buy-Up |
| Carrier | Delta Dental of NC | MetLife | MetLife |
| Calendar Year Maximum | \$2,000 | \$1,250 | \$1,750 |
| Annual Deductible (Individual/Family) | \$50 / \$150 | \$25/\$75 | \$25/\$75 |
| Preventive (i.e. Exams & X-Rays) | 100% | 100% | 100% |
| Basic (i.e. Simple Extractions) | 80% | 80% | 100% |
| Major (i.e. Crowns) | 50% | 50% | 50% |
| Orthodontia Lifetime Maximum | 50% (\$1,500 lifetime max) | Not Covered | \$1,500 Children Under 19 |
| Paycheck Premium Cost | Bi-Weekly (26 pay periods) | Semi-Monthly (24 pay periods) | |
| Employee | \$3.02 | \$11.84 | \$14.01 |
| Employee + Spouse | \$17.51 | \$24.02 | \$28.43 |
| Employee + Child(ren) | \$20.34 | \$27.45 | \$36.59 |
| Employee + Family | \$37.23 | \$42.04 | \$54.46 |

Type B - Basic Restorative

- Amalgam and Composite Fillings
- Prefabricated Crowns
- Repairs
- Endodontics Root Canal
- Periodontal Surgery
- Periodontal Scaling & Root Planing
- Periodontal Maintenance
- Oral Surgery (Simple Extractions)
- Oral Surgery (Surgical Extractions)
- Other Oral Surgery
- General Anesthesia
- Consultations